

<b>FINANCIAL AFFIDAVIT</b> <small>Rev. 5/98</small>	
IN SUPPORT OF REQUEST FOR ATTORNEY FEES AND/OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE	
IN UNITED STATES <input type="checkbox"/> MAGISTRATE <input type="checkbox"/> DISTRICT <input type="checkbox"/> APPEALS COURT or <input type="checkbox"/> OTHER PANEL (Specify below)	
IN THE CASE OF <u>U.S.</u> v.s. <u>Reyes-Santana</u>	
FOR <u>Mass</u> AT <u>Boston</u>	
LOCATION NUMBER <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
PERSON REPRESENTED (Show your full name) <u>Joan Reyes-Santana</u>	
CHARGE/OFFENSE (describe if applicable & check box →) <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor	
1 <input checked="" type="checkbox"/> Defendant—Adult 2 <input type="checkbox"/> Defendant - Juvenile 3 <input type="checkbox"/> Appellant 4 <input type="checkbox"/> Probation Violator 5 <input type="checkbox"/> Parole Violator 6 <input type="checkbox"/> Habeas Petitioner 7 <input type="checkbox"/> 225S Petitioner 8 <input type="checkbox"/> Material Witness 9 <input type="checkbox"/> Other	
DOCKET NUMBERS Magistrate <u>2004m0441RB-02</u> District Court Court of Appeals	

<b>EMPLOYMENT</b>	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed										
	Name and address of employer: _____										
	IF YES, how much do you earn per month? \$ <u>0</u>	IF NO, give month and year of last employment <u>9/03</u> How much did you earn per month? \$ <u>700</u>									
	If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ _____ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____										
<b>ASSETS</b>	<b>OTHER INCOME</b>	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES RECEIVED <u>560/00</u> SOURCES <u>unemployment</u>									
	<b>CASH</b>	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ _____									
	<b>PROPERTY</b>	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, GIVE THE VALUE AND \$ DESCRIBE IT <table style="width: 100%;"> <thead> <tr> <th style="width: 50%;">VALUE</th> <th style="width: 50%;">DESCRIPTION</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	VALUE	DESCRIPTION							
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<b>OBLIGATIONS &amp; DEBTS</b>	<b>MARITAL STATUS</b> <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED		Total No. of Dependents <u>0</u>	List persons you actually support and your relationship to them _____ _____ _____	
	<b>DEPENDENTS</b>		_____ _____ _____		
	<b>DEBTS &amp; MONTHLY BILLS</b> <small>(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)</small>	APARTMENT OR HOME: <u>Rat</u>	Creditors	Total Debt	Monthly Paymt.
				\$	\$ <u>200/mo</u>
			\$	\$	
			\$	\$	

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

JAN 20 2004

 SIGNATURE OF DEFENDANT  
 (OR PERSON REPRESENTED)

Joan Santana